2000 TC40000-1

IDAHO INDIVIDUAL INCOME TAX RETURN

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For th	e vear	January 1 - [- December 31, 2000, or fiscal year beginning, 2000, ending							2001				
Your first name and initial Last na							Your So	ocial Secur						
												1	1	
'		If a joint return, spo	use's first name and initial	1	ast r	name	2				Spouse	e's Social S	ecurity N	umber
lab	el.											1	1	
Other		Address (number st	treet and apartment number)											
please	•	, tadi ess (namber, si	and apartment names.									IMPO.	RTAN	T! 📥
					Yo	ou mus	t enter	your						
		ony, state and zip o	Sout									SSN(s	s) abovi	e.
				1.1										
r you	and y	our tax prepar	rer need Idaho income tax forms a (MUST MATCH FEDERAL RETURN)	and instruct				•			DOX.	• L	number o	of.
	1.	Single	(MOST WATCHTEDERAL RETORN)			6a.	Your	self	Spouse	9			s checked	
JS	2.		joint return (even if only one had inco	ome)	S		Caution:		arent or so					•
STATUS	3.		g separate return you as a dependent on his or her to					tax retu	rn,					
¥		Enter spouse's SSN	DO NOT - h l . h / -											
	4	and full name here.			<u>⊢</u>	b.	Number	of your de	ependent c	:hildren fr	om fe	deral for	·m	•
9	4.	Head of house			▄									
FILING		Enter name of pers who qualifies you.			≍	C.	Number	of other d	lependents	from fed	deral fo	orm		•
<u>L</u>	5.	1 '	dow(er) with dependent child		_									
		Year spouse died:_	<u> </u>						nd c					
HERE		D ELECTION CA 1 of my income tax t Campaign Fund (\$2 of	IVII AIGIN I OND	stitution 2	Dem _ _	ocrat	tic Liberta	rian Natu 4 • [ral Law 5	Reform •	Rep	oublican	7 •	ecific party
뿔		ME. See instruc			• _		• 🗀	• [• 🗀	ΤĖ		•	Н—
S				Form 1040.	line	33	3: federal F	orm 1040	DA. line 19):				
PE		Enter your federal adjusted gross income from federal Form 1040, line 33; federal Form 1040A, line 19; or federal Form 1040EZ, line 4. Attach a complete copy of your federal return.							9			00		
COPIES		· · · · · · · · · · · · · · · · · · ·							7			100		
		ADDITIONS. See instructions, page 5. O. Federal net operating loss carryforward included in line 9						10			00			
W-2								11			00			
		11. Capital loss carryforward incurred outside the state before becoming an Idaho resident							12			00		
STATE											\vdash			00
¥		ther additions. Attach explanation							13			00		
		Income and additions. Add lines 9 through 13.							14			00		
АТТАСН			IS. See instructions, pages 5 through 7.											
Ĭ			erating loss carryforward. Attach Form 56							-				
Ę			come tax refund if included in federal income							-				
٩			from U.S. Government obligations							-				
			o residence					18		00	-			
RE		P. Alternative energy devices. Attach Form 39							-					
무		D. Child/dependent care. Attach federal Form 2441 or 1040A, Schedule 2 • 20 00							-					
_		. Retirement benefits deduction. Attach Form 39 • 21 00							-					
PAYMENT HER		2. Social security and railroad benefits, if included in federal income												
⅀		. Technological equipment donation						-						
۲	24. ld	. Idaho capital gains deduction. Attach Form CG						-						
		5. Adoption expenses						-						
АТТАСН	26. ld	b. Idaho medical savings account. Contributions Interest • 26 00							_					
Ă		College savings program												
F	28. O	Other subtractions. Attach Form 39 280												
٩	29. TO	29. TOTAL SUBTRACTIONS. Add lines 15 through 28.							29			00		
	30. TOTAL ADJUSTED INCOME. Subtract line 29 from line 14.							30			00			
	Unde	r penalties of pe	erjury, I declare that to the best of my	y knowledge	and	d be	elief this re	eturn is tru	ue, correct	and com	plete.			
			receiving this return, the Idaho State		sio	n m			preparer t	o discuss				
	Your sig	nature		Date			Paid prepare	er's signature			Prepa	rer's EIN, S	SSN, or P	TIN
SIGN	•						•							
HERE	Spouse'	s signature (if a joint	return, BOTH MUST SIGN)	Daytime phone			Address and	d phone numb	er					
	•													

31. TOTAL	ADJUSTED INCOME. Amount from line 30.	31	C	00
TAX COMPL	JTATION. See instructions, pages 7 and 8.			_
	a. If age 65 or older • Yourself • Spouse			
	32. CHECK— b. If blind • Yourself • Spouse			
	C. If your parent or someone else can claim you as a dependent,			
Standard	check here and enter zero on lines 38 and 59			
Deduction For Most	33. Itemized deductions. Attach federal Schedule A. Federal limits apply. • 33)		
People	34. All state and local income taxes included on federal Schedule A, line 5 • 34)		
Single:	35. Subtract line 34 from line 33. If you do not use federal Schedule A, enter zero.	35	C	00
\$4,400	36. Standard deduction. See instructions, page 7, if you checked any box on line 32	36		00
Head of	37. Subtract the LARGER of line 35 or 36 from line 31. If less than zero, enter zero.	37		00
Household:	38. Multiply \$2,800 by the number of exemptions claimed on line 6d. Federal limits apply	38		00
\$6,450	39. Taxable income. Subtract line 38 from line 37. If less than zero, enter zero	39		00
Married	40. TAX from tables or rate schedule. See instructions, page 26.	40	C	00
filing	CREDITS. Limits apply. See instructions, pages 8 and 9.			
Jointly: \$8,800	41. Income taxes paid to other states.			
40,000	Attach Form 39 and a copy of the other state return(s)			
Married filing	42. Credit for contributions to educational entities	_		
Separately:	43. Investment tax credit. Attach Form 49. Earned •Allowed • 43OC			
\$3,675	44. Credit for contributions to youth and rehabilitation facilities			
Qualifying				
Widow(er):	46. Natural resources conservation credit			
\$7,350	48. Credit for qualifying new employees, Attach Form 55			
		49		00
	49. TOTAL CREDITS. Add lines 41 through 48	50		
		30		00
	ES. See instructions, pages 9 and 10. fuels tax due. Attach Form 75.			
•	<u> </u>		00	
52. Sales/U			00	
53. Tax fro			00	
54. Perman	54 • 55		00	
	TAX. Add lines 50 through 54. S. See instructions, page 10.	55		<i>,</i>
	o donate to the Nongame Wildlife Conservation Fund.			00
	o donate to the Norgame Wilding Conservation Fund.			00
	TAX PLUS DONATIONS. Add lines 55 through 57.			00
	and OTHER CREDITS. See instructions, page 10.	58)()
	credit. \$15 per person claimed on line 6d	59		00
60. Addition			00	
61. Maintair			00	
	62		50	
-	fuels tax refund • Gasoline tax refund • Attach Form 75. come tax withheld. Attach Form(s) W-2			00
			00	
	orm 51 payment(s) and amount applied from 1999 return	65		00
	58 is more than line 65, GO TO LINE 66. If line 65 is more than line 58, GO TO LINE 69.	00		<i></i>
REFUND or	TOTAL DUE. See instructions, pages 10 and 11.			
	IE. Culturat Vina (Efranc Vina EQ	66		00
	Interest from the due date Enter total	00		<i></i>
	he box if the penalty is due to an ineligible withdrawal from an Idaho medical savings account. •	67		00
01.001.	ine son in the penalty to due to an inergise tritial area in an idane incade outlings account.	07		<i></i>
68. TOTAL	DUE. Add lines 66 and 67. Make check or money order payable to the Idaho State Tax Commission	68		00
69. OVERPA	AID. Line 65 minus lines 58 and 67. This is the amount you overpaid • 69 OC	4		
70 DEC. 200	O. Amount of line 69 to be refunded to you.	\l		
/U. REFUND	D. Amount of line 69 to be refunded to you	4	1	
71 FSTIMA	TED TAX. Amount of line 69 to be applied to your 2001 estimated tax.	. 71		00